# P07000023874

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
HILACIO DIAZ GAVE AUTHORIZATION BY PHONE TO CORRECT Shares DATE 2/22/07 DOC. EXAM. TH				

Office Use Only



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SECRETARY OF SIMIL

107 FEB 22 PH 12:

#### **COVER LETTER**

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: HD J	ANITORIAL SERVICES	S, INC.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: HI	LARIO G. DIAZ		
	Name	(Printed or typed)	•
	1501 SW NERVIA AVE		
•	7	Address	
_	PORT ST. LUCIE, FL 3495		
	City,	State & Zip	
•	772-940-9411		
•	Daytime T	elenhone Rumber	<del></del>

NOTE: Please provide the original and one copy of the articles.

#### ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

2007 FEB 22 PM 12: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE I NAME

The name of the corporation shall be:

HD JANITORIAL SERVICES, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1501 SW NERVIA AVE PORT ST. LUCIE, FL 34953

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE JANITORIAL SERVICES

## ARTICLE IV SHARES

The number of shares of stock is:

B1

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# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

HILARIO G DIAZ, PRESIDENT

1501 SW NERVIA AVE

PORT ST. LUCIE, FL 34953

LAURYS DIAZ, VICE PRESIDENT

1501 SW NERVIA AVE

PORT ST. LUCIE, FL 34953

### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

HILARIO G DIAZ 1501 SW NERVIA AVE

PORT ST. LUCIE, FL 34953

# ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Signature/Registered Agent

HILARIO G DIAZ

1501 SW NERVIA AVE

PORT ST. LUCIE, FL 34953

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Incorporator

2-19-07 Date 2-19-07

Date